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	CLAIM		D - PART	I M	loston Meredo cional Stago Pro uralogal Speciali	ese st	SMALLE	NTITY		Mindon Ave	Proper
S. NATION	AL STAGE FEE		olumn 1)	_ <u>(7</u>	030-805-8221	7	TYPE		((703) 325-A	12 1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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·		(4) =	(4) = \$50/\$100 U.S. is ISA = \$50/\$100		\$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	200
		a ALL other	ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =		X \$ 125 =		-	X \$ 250	
TOTAL CHARGEABLE CLAIMS		8	minus 20 = .				X \$ 25 =	+	٦,		
EPENDENT (CLAIMS	2	minus 3 =	_				-	\dashv	-	
MULTIPLE DEPENDENT CLAIM PRESENT					P			 	\dashv		٠
If the difference in column 1 is less than zero, enter "0"				in c	olumn 2		TOTAL	-			1000
	CI AIMS AS	AMEND						<u></u>	」 。	TOTAL	126
	(Column 1)	AMENDE			(Column 3)		SMALL I	ENTITY	OR		R THAN .
	REMAINING AFTER AMENDMENT		NUMBE PREVIOU	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
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-	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS	LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
otal	*	Minus	**		= .	Γ	X \$ 25 =		OR	X \$ 50 =	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	\$ 180 =		ŀ		
-						10	TAL ADDIT. FEE		L		
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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.